

March 18, 2002

Mr. Tom Rich
TRANSFLO Terminal Services, Inc.
6735 Southpoint Drive South, J975
Jacksonville, Florida 32216

Re: 089-15651-00364
Second Administrative Amendment to
FESOP F089-7702-00364

Dear Mr. Rich:

Bulk Intermodal Distribution Services, Inc., was issued a FESOP permit on June 11, 1998 for a stationary bulk liquid and solid material transfer source. A letter requesting a name change and change of corporate mailing address was received on March 5, 2002. Pursuant to the provisions of 326 IAC 2-8-10 the permit is hereby administratively amended as follows:

A.1 General Information [326 IAC 2-8-3(b)]

The Permittee owns and operates a stationary bulk liquid and solid material transfer source.

~~Responsible Official:~~

Authorized Individual: Tom Rich
Source Address: 1401 West 145th Street, East Chicago, Indiana 46312
Mailing Address: ~~P. O. Box 658, East Chicago, Indiana 46312~~
6735 Southpoint Drive South, J975, Jacksonville, Florida 32216
SIC Code: 4214
County Location: Lake
County Status: Attainment for CO and Lead
Primary Nonattainment for TSP and SO₂
Moderate Nonattainment for PM-10
Severe Nonattainment for ozone
Source Status: Federally Enforceable State Operating Permit (FESOP)
Minor Source, under PSD or Emission Offset Rules;
Minor Source, Section 112 of the Clean Air Act

Mr. Tom Rich remains as the Authorized Individual and meets the requirements of 326 IAC 2-1.1-1(1) as an Authorized Individual. The term Authorized Individual was changed from Responsible Official to meet the definition of 326 IAC 2-1.1-1(1).

Bulk Intermodal Distribution Services, Inc. (BIDS) changed its name to TRANSFLO Terminal Services, Inc. (TTSI). TRANSFLO Terminal Services, Inc. is a wholly-owned subsidiary of TRANSFLO Corporation. TRANSFLO Corporation is wholly-owned by CSX Corporation.

All other conditions of the permit shall remain unchanged and in effect. Please attach a copy of this amendment and the following revised permit pages to the front of the original permit.

TRANSFLO Terminal Services, Inc.
East Chicago, IN 46312

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089-15651-00364

This decision is subject to the Indiana Administrative Orders and Procedures Act - IC 4-21.5-3-5. If you have any questions on this matter, please contact Gary Freeman, at (800) 451-6027, press 0 and ask for Gary Freeman or extension (3-5334), or dial (317) 233-5334.

Sincerely,
Original signed by

Paul Dubenetzky, Chief
Permits Branch
Office of Air Quality

Attachments: Updated Pages

PD/gkf

cc: File -Lake County
Lake County Health Department
Air Compliance Section Inspector - Ramesh Tejuja/Rick Massoels
Compliance Data Section -Karen Nowak
IDEM Northwest Regional Office
Air Programs - Chet Bohannon
Permit Review Section 1 - Gary Freeman
East Chicago-Local Agency
Enviroplan File - 089-12412-00364

**FEDERALLY ENFORCEABLE STATE
OPERATING PERMIT (FESOP)
and ENHANCED NEW SOURCE REVIEW
OFFICE OF AIR QUALITY**

**TRANSFLO Terminal Services, Inc.
1401 West 145th Street
East Chicago, Indiana 46312**

(herein known as the Permittee) is hereby authorized to operate subject to the conditions contained herein, the source described in Section A (Source Summary) of this permit.

This permit is issued in accordance with 326 IAC 2 and 40 CFR Part 70 Appendix A and contains the conditions and provisions specified in 326 IAC 2-8 and 326 IAC 2-1-3.2, as required by 42 U.S.C. 7401, et. seq. (Clean Air Act as amended by the 1990 Clean Air Act Amendments), 40 CFR Part 70.6, IC 13-15 and IC 13-17.

Operation Permit No.: F089-7702-00364	
Issued by: Paul Dubenetzky, Branch Chief Office of Air Quality	Issuance Date: June 11, 1998 Expiration Date: June 11, 2003

First Administrative Amendment 089-12847-00364, issued November 3, 2000

Second Administrative Amendment: 089-15651-00364	Pages Affected: 4, 31, 32, 33, 34 and 35
Issued by: Original signed by Paul Dubenetzky, Branch Chief Office of Air Quality	Issuance Date: March 18, 2002

SECTION A SOURCE SUMMARY

This permit is based on information requested by the Indiana Department of Environmental Management (IDEM), Office of Air Quality (OAQ), and presented in the permit application.

A.1 General Information [326 IAC 2-8-3(b)]

The Permittee owns and operates a stationary bulk liquid and solid material transfer source.

Authorized Individual: Tom Rich
Source Address: 1401 West 145th Street, East Chicago, Indiana 46312
Mailing Address: 6735 Southpoint Drive South, J975, Jacksonville, Florida 32216
SIC Code: 4214
County Location: Lake
County Status: Attainment for CO and Lead
Primary Nonattainment for TSP and SO₂
Moderate Nonattainment for PM-10
Severe Nonattainment for ozone
Source Status: Federally Enforceable State Operating Permit (FESOP)
Minor Source, under PSD or Emission Offset Rules;
Minor Source, Section 112 of the Clean Air Act

A.2 Emission Units and Pollution Control Equipment Summary [326 IAC 2-8-3(c)(3)]

This stationary source consists of the following emission units and pollution control devices:

- (a) Transfer of HAP VOL and non-HAP VOLs with vapor pressure greater than or equal to 0.5 psia, using the submerged liquid loading method between rail tank cars and tanker trucks, utilizing a vapor balance system equipped with false domes to recover vapor expelled from the tanker trucks;
- (b) Transfer of bulk non-HAP VOLs with vapor pressure less than 0.5 psia, between rail tank cars and tanker trucks, using the splash loading method;
- (c) Transfer of bulk hydrochloric acid (no more than 37% by weight in concentration) using the submerged liquid loading method between rail tank cars and tanker trucks, utilizing a portable counter-current acid scrubber for controlling acid fumes in the vent gas during the transfer; and
- (d) Transfer of bulk solid from railcars to trucks, with a maximum transfer capacity of 1,900 tons per day, using fully enclosed conveyor systems or vacuum solid transfer systems, each equipped with a Mastervac internal filter for particulate matter control.

A.3 Insignificant Activities [326 IAC 2-7-1(21)] [326 IAC 2-8-3(c)(3)(I)]

This stationary source also includes the following insignificant activities, as defined in 326 IAC 2-7-1(21):

- (a) One (1) fired by No. 2 fuel oil or natural gas, rated at 1.67 million British thermal units (mmBtu per hour);
- (b) One (1) No. 2 diesel fuel fired boiler, rated at 2.0 million British thermal units (mmBtu) per hour exhausting through one (1) stack, identified as Boiler Stack
- (c) Blowdown for any of the following: sight glass, boiler, compressors, pumps, and cooling tower; and
- (d) Two (2) 500 gallon diesel oil storage tanks.

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE DATA SECTION**

**FEDERALLY ENFORCEABLE STATE OPERATING PERMIT (FESOP)
CERTIFICATION**

Source Name: TRANSFLO Terminal Services, Inc.
Source Address: 1401 West 145th Street, East Chicago, Indiana 46312
Mailing Address: 6735 Southpoint Drive South, J975, Jacksonville, Florida 32216
FESOP No.: F089-7702-00364

**This certification shall be included when submitting monitoring, testing reports/results
or other documents as required by this permit.**

Please check what document is being certified:

- 9 Annual Compliance Certification Letter
- 9 Emergency/Deviation Occurrence Reporting Form
- 9 Test Result (specify) _____
- 9 Report (specify) _____
- 9 Notification (specify) _____
- 9 Other (specify) _____

I certify that, based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete.

Signature:

Printed Name:

Title/Position:

Date:

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE DATA SECTION
P.O. Box 6015
100 North Senate Avenue
Indianapolis, Indiana 46206-6015
Phone: 317-233-5674
Fax: 317-233-5967**

**FEDERALLY ENFORCEABLE STATE OPERATING PERMIT (FESOP)
EMERGENCY/DEVIATION OCCURRENCE REPORT**

Source Name: TRANSFLO Terminal Services, Inc.
Source Address: 1401 West 145th Street, East Chicago, Indiana 46312
Mailing Address: 6735 Southpoint Drive South, J975, Jacksonville, Florida 32216
FESOP No.: F089-7702-00364

This form consists of 2 pages

Page 1 of 2

Check either No. 1 or No.2

- 9** 1. This is an emergency as defined in 326 IAC 2-7-1(12)
CThe Permittee must notify the Office of Air Quality (OAQ), within four **(4)** business hours (1-800-451-6027 or 317-233-5674, ask for Compliance Section); and
CThe Permittee must submit notice in writing or by facsimile within two **(2)** days (Facsimile Number: 317-233-5967), and follow the other requirements of 326 IAC 2-7-16
- 9** 2. This is a deviation, reportable per 326 IAC 2-7-5(3)(c)
CThe Permittee must submit notice in writing within ten **(10)** calendar days

If any of the following are not applicable, mark N/A

Facility/Equipment/Operation:

Control Equipment:

Permit Condition or Operation Limitation in Permit:

Description of the Emergency/Deviation:

Describe the cause of the Emergency/Deviation:

If any of the following are not applicable, mark N/A

Page 2 of 2

Date/Time Emergency/Deviation started:
Date/Time Emergency/Deviation was corrected:
Was the facility being properly operated at the time of the emergency/deviation? Y N Describe:
Type of Pollutants Emitted: TSP, PM-10, SO ₂ , VOC, NO _x , CO, Pb, other:
Estimated amount of pollutant(s) emitted during emergency/deviation:
Describe the steps taken to mitigate the problem:
Describe the corrective actions/response steps taken:
Describe the measures taken to minimize emissions:
If applicable, describe the reasons why continued operation of the facilities are necessary to prevent imminent injury to persons, severe damage to equipment, substantial loss of capital investment, or loss of product or raw materials of substantial economic value:

Form Completed by: _____
Title / Position: _____
Date: _____
Phone: _____

Attach a signed certification to complete this report.

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF AIR QUALITY COMPLIANCE DATA SECTION

FESOP Quarterly Report

Source Name: TRANSFLO Terminal Services, Inc.
Source Address: 1401 West 145th Street, East Chicago, Indiana 46312
Mailing Address: 6735 Southpoint Drive South, J975, Jacksonville, Florida 32216
FESOP No.: F089-7702-00364
Facility: Bulk Liquid Transfer
Parameter: Gallons Transferred per Month
Limit:

Liquid Type	VP Range (psia @ 78°F)	1000 Gal. per Month	Liquid Type	VP Range (psia @ 78°F)	1000 Gal. per Month
Non-HAP VOL	> 0.5 & #1.5	1,050	HAP VOL	> 2.0 & # 2.8	1,500
Non-HAP VOL	# 0.5	1,050	HAP VOL	> 1.0 & # 2.0	2,000
Non-HAP VOL	# 0.05	1,050	HAP VOL	# 1.0	1,725
			Hydrochloric Acid	# 2.0	5,413

YEAR:

Type of Liquid	VP Range (psia @ 78°F)	Amount Transferred (1000 Gal. per Month)		
		Month 1	Month 2	Month 3
Non-HAP VOL	> 0.5 & #1.5			
Non-HAP VOL	# 0.5			
Non-HAP VOL	# 0.05			
HAP VOL	> 2.0 & # 2.8			
HAP VOL	> 1.0 & # 2.0			
HAP VOL	# 1.0			
Hydrochloric Acid	# 2.0			

- 9 No deviation occurred in this quarter.
9 Deviation/s occurred in this quarter.
Deviation has been reported on: _____

Submitted by: _____
Title / Position: _____
Signature: _____
Date: _____
Phone: _____

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE DATA SECTION**

**FEDERALLY ENFORCEABLE STATE OPERATING PERMIT (FESOP)
QUARTERLY COMPLIANCE REPORT**

Source Name: TRANSFLO Terminal Services, Inc.
Source Address: 1401 West 145th Street, East Chicago, Indiana 46312
Mailing Address: 6735 Southpoint Drive South, J975, Jacksonville, Florida 32216
FESOP No.: F089-7702-00364

Months: _____ **to** _____ **Year:** _____

This report is an affirmation that the source has met all the requirements stated in this permit. This report shall be submitted quarterly. Any deviation from the requirements and the date(s) of each deviation must be reported. Additional pages may be attached if necessary. This form can be supplemented by attaching the Emergency/Deviation Occurrence Report. If no deviations occurred, please specify zero in the column marked "No Deviations".

LIST EACH COMPLIANCE REQUIREMENT EXISTING FOR THIS SOURCE:

Requirement (eg. Permit Condition D.1.3)	Number of Deviations	Date of each Deviation	No Deviations

Form Completed By: _____
Title/Position: _____
Date: _____
Phone: _____

Attach a signed certification to complete this report.